

nothing which was presented to her nostrils, she was troubled with an offensive putrid odour, which she imagined was always present, whilst the sense of taste had become so obtuse, that she could neither distinguish tea from water, nor salt from soda. I had been acquainted with her for a long time, and had frequently prescribed various remedies without success, as a great many other practitioners also had done. The mucous membrane of both nostrils was swelled, redder than natural, and so acutely sensitive, that she could not bear the slightest touch with my probe. These symptoms and appearances might have induced me to the opinion of the case being one of malignant polypus; but though the disease had existed so long without any amendment, it had, on the other hand, made no advance; and besides this circumstance, the history of the case, and the co-existence of the thoracic affection, were not in favour of this supposition. One morning, whilst sitting near her, and witnessing the constant annoyance from which she was suffering, I remembered that, whilst I was attending her for an acute disease, by which she was confined to her bed, she mentioned that her head and chest symptoms had suddenly become much better, for she had barely wet a single handkerchief, and fancied she had perceived the savoury odour of a stew, which was being prepared in the kitchen. I paid no attention to this circumstance at the time, especially as, a few days later, I noticed that she again seemed as bad as ever. But now, and it was at least a twelvemonth afterwards, a bright thought struck me; I remembered that, at the time she spoke of this amendment, she was taking opium in considerable quantities, for a spasmodic pain in the bowels. My opinions on the effects of opium, which I have above detailed, were already formed, and I determined upon having recourse to it in this instance. I laughingly told her that a brilliant idea had come into my head, and that I now knew what would give her relief. The good old soul shook her head doubtfully, and said that she would give me fifty pounds if it did. (She never paid me, if she meant it.) Desirous of concealing the nature of the remedy, I prescribed the *Pilula Styracis Composita*, in five grain doses, every night at bed-time. Some improvement was apparent in the course of a very few days, and it became continually progressive. In two months she ceased to wet more than a single handkerchief daily, and had even some return of the sense of smell and taste, whilst she had now become comparatively indifferent to a low atmospheric temperature; for although during the whole of the previous winters she had been obliged to confine herself to one room, or to move through the passages with a shawl, or a respirator, before her mouth, during the next cold season she wandered about the house, without finding any precaution necessary. She always had expressed herself with extreme confidence of the benefit she had received, and, as a proof of her faith, I may mention the great glee with which, during her last illness, she received the intelligence that I allowed her to have one of her old pills; those pills, she believed, would cure every malady. She died of another complaint, seven months after the commencement of this treatment, but I believe that the improvement in her head and chest symptoms had been progressive to the last.

Opium-eaters generally complain of feeling cold and shrunk up, when they are deprived of their habitual stimulus. These effects of opium on the mucous membrane are well illustrated in the following passage, which is taken from the "*Confessions of an English Opium-Eater*:"—

"I must mention one symptom which never failed to accompany any attempt to renounce opium,—viz., violent sternutation. This now became exceedingly troublesome, sometimes lasting for two hours at a time, and recurring at least two or three times a day. It is remarkable, also, that during the whole period of years through which I had taken opium, I had never once caught cold, not even the slightest cough, but now a violent cold attacked me, and a cough soon after."—*Prov. Med. and Surg. Journ.*, Nov. 15, 1848.

11. *Physiological Action of the Iodide of Potassium.* By MM. BOYS DE LOURY and COSTILHES.—In an article on the therapeutic action of different medicines used at St. Lazare, in the treatment of syphilis, these gentlemen remark that they have paid particular attention to the effects produced by this medicine, and that they occur in the following order:—

1. *Action on the Intestinal Canal.*—The first day, the dose being 0.75 gramme

(10 to 12 grs.), slight pain and heaviness in the stomach: the pain is, however, not always present; the appetite is usually increased; it is remarkable how soon after the taking of the iodide the desire for food arises.

The following days these symptoms diminish or disappear. The second day, the dose being 1·00 gramme (upwards of 15 grs.), heaviness of the head, colic, and diarrhoea.

2. *On the Urinary Secretion.*—This is more abundant the first day, that is, the patient passes more than he drinks. This symptom is almost constant. The urine is clear and transparent—the patients urinate more by night than by day. Sometimes, however, the urine is not increased.

3. *Eruption.*—The most frequent is the pustule of acne, which shows itself from the end of the first to the second day. It most frequently occurs on the face; it does not usually last as long as the treatment, that is, it disappears in 15 or 20 days. Ecthyma more rarely. Neither papular erythema nor purpura hemorrhagica was observed; in one case an eczema impetiginoides was seen.

4. *Pruritus* very seldom observed.

5. *Conjunctivitis.*—The conjunctiva was sometimes influenced when the iodide was given in doses of 1 to 2 grms. Both conjunctivas may become inflamed. It principally occurred during the first days of the use of the medicine, and was characterized by general vascularity and chemosis.

6. *Menstruation.*—Although this medicine is spoken of by most authors as an emmenagogue, they often remarked a decrease in the quantity of the menstrual fluid. Once the discharge re-appeared a week after the menstrual period; but this may have been only a coincidence.

7. *Discharges* from the uterine cavity were not perceptibly increased.

8. As invariable and immediate effects, the authors never once failed to see the decrease or suspension of the pains of the bones after the first or second day of treatment. No other antisyphilitic agent possesses so prompt and constant an action.

9. *Salivation.*—This is a rare symptom in women; it was seen only once. M. Ricord observed it more frequently, perhaps, because he gave the medicine in larger doses. The saliva remained thin, the mucous membrane of the mouth uninfamed and unaltered; the salivary glands not swollen—a true hypersecretion, without peculiar smell.

10. *Effects on the Circulation*—none.

11. *Accidents produced by the Iodide.*—The authors object to giving the iodide in such large doses as some physicians administer it. M. Biechy relates two cases in which serious accidents were produced. In the first, the patient being benefited by doses of three-fourths of a grain, gradually increased to fifteen grains, thought by doubling the dose to double the advantage received. The first three days he suffered from general uneasiness and intense headache; the fourth day he was affected in his lower limbs, his sight disturbed, and his hearing almost gone; on trying to walk, his legs gave way under him, and his arms had lost all power. Finally, having taken a few steps, he fell unconscious; on coming to himself, he remained in a state of languor and weakness, which did not disappear for several days after the suspension of the medicine. In the second case, death ensued; but it was doubtful if it could be attributed to the iodide.—*Month. Journ.*, July, 1848, from *Gaz. Méd. de Paris*.

12. *Action of Chloroform.*—M. MALGAIGNE has made to the French Academy of Medicine a very interesting report on chloroform. The following are his conclusions:—

1. Chloroform is a most energetic substance, which may be classed with poisons, and should be only used by experienced persons. 2. It is liable to cause irritation of the air passages, and should be employed with reserve in persons suffering from the lungs or heart. 3. Chloroform possesses a special toxic action, which has been profited by, and is carried as far as the production of insensibility, but which may occasion death if improperly prolonged. 4. Certain modes of exhibition increase the perils inherent to chloroform; thus asphyxia may be brought on, if the anæsthetic vapours are not sufficiently mixed with air, or if respiration is not performed with freedom. 5. All these dangers may be obviated if the sur-